



**EXHIBITOR REGISTRATION**  
**17th Annual Missouri Interpreters Conference**  
**October 15-17, 2010**  
**Tan-Tar-A Resort, Osage Beach, MO 65065**



Exhibit space will be available on a first-come first-serve basis. All exhibit space will be pre-assigned.  
Contact Kim Davis at (573) 526-5205 (V/TTY/VP) or [kim.davis@mcdhh.mo.gov](mailto:kim.davis@mcdhh.mo.gov) if you need additional information.



**EACH EXHIBIT BOOTH WILL INCLUDE:**

One (1) Table Top Display - \$85.00  
6' x 30" skirted table  
Exhibit name sign  
2 Chairs  
1 Wastebasket  
Exhibitor Name advertised in the 2009 Conference Program Book

**\*\* See bottom of page for additional price list \*\***

**EXHIBIT BOOTH HOURS**

**Friday October 15, 2010**

Set-up from 3:00 p.m. - 6:00 p.m.  
Exhibit hours 6:00 p.m. - 11:00 p.m.

**Saturday October 16, 2010**

Exhibit hours 7:30 a.m. - 6:00 p.m.  
Tear-Down from 6:00 p.m. - 9:00 p.m.

**Sunday October 17, 2010**

*CLOSED*

**DOOR PRIZES & SILENT AUCTION**

The Planning Committee welcomes the donation of door prizes and items for our 6th Annual Silent Auction. If you would like to donate an item, contact Angela Graves ([angela.graves@mcdhh.mo.gov](mailto:angela.graves@mcdhh.mo.gov))

**EXHIBITOR CARDS**

Conference attendees have an opportunity to win prizes by stopping by your exhibit booth. Exhibitors will be provided with a stamp to use for participants Door Prize Entry Card. This effort will increase the crowd to your booth.

Name \_\_\_\_\_

(Please indicate name to be used on the exhibitor name sign and conference program book)

Name of Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Street

P.O. Box

City

State

Zip

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Email notifications will be sent when registration is received. Notification will **not** be sent via US Postal Service.

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\_\_\_\_\_ 1 table top display @ \$85.00  
\_\_\_\_\_ Additional table(s) @ \$40.00 each  
\_\_\_\_\_ Saturday Luncheon @ \$20.00 each

\_\_\_\_\_ 1 table top display with electricity @ \$ 130.00  
\_\_\_\_\_ 1 table, electricity, & T1 hard wire @ \$ 250.00  
\_\_\_\_\_ Additional chair(s) @ \$5.00 each

Name of Person(s) Exhibiting \_\_\_\_\_ TOTAL \$ \_\_\_\_\_ Please  
submit a check payable to **MCDHH/BCI Fund**

For more information: **WWW.MCDHH.MO.GOV** or Mail this form and payment by **September 27, 2010** to:  
**Missouri Commission for the Deaf and Hard of Hearing,**

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